

## Application Data Sheet

### **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Title:: Modular Radial Component for a Total Wrist Arthroplasty

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Conrad

Family Name:: Klotz

City of Residence:: Nappanee

State or Province of Residence:: IN

Country of Residence:: US  
Street of mailing address:: 3005 Blackstone Way  
City of mailing address:: Nappanee  
State or Province of mailing address:: IN  
Postal or Zip Code of mailing address:: 46550

### **Applicant Information**

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name: Daren

Family Name:: Deffenbaugh

City of Residence:: Winona Lake

State or Province of Residence:: IN

Country of Residence:: US

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City of mailing address:: Winona Lake

State or Province of mailing address:: IN

Postal or Zip Code of mailing address:: 46590

### **Correspondence Information**

Correspondence Customer Number:: 28078

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### **Representative Information**

Representative Customer Number:	28078
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### **Domestic Priority Information**

Application::	Continuity Type:	Parent Application::	Parent Filing Date::